

Growing Healthy Kids Columbus

VISION: Columbus is a community in which all children live in a smoke-free environment, have daily opportunities for active play, and have access to nutritious foods so they enter kindergarten ready to live, learn and play at their best.

Minutes

October 30, 2018 10:00am - 11:30am Columbus Public Health, 119D

Attendance

Organization	Member
Columbus City Schools (CCS)	Carolyn Bernard
Columbus City Schools – Early Childhood (CCS)	Lisa German
Children's Hunger Alliance (CHA)	Michelle Hoffman
Children's Hunger Alliance (CHA)	Laura Poland
CPH – Access to Care	Emily Fisher
CPH – CDC PHAP, Chronic Disease Prevention	Lyana Delgado
CPH – Creating Healthy Communities	Katie Stone
CPH – Growing Healthy Kids Columbus	Ali Segna
CPH – Healthy Children Healthy Weights	Hannah Bills
CPH – Healthy Children Healthy Weights	Alyssa Dorsey
CPH – Healthy Children Healthy Weights	Abby Gerbers (Intern)
Franklin County Public Health (FCPH)	Ashton Grigley
Moms2B	Lydia Burney
OSU	Ingrid Adams
OSU	Matt Kretovic
OSU – Extension	Carol Smathers
YMCA of Central Ohio – Early Head Start	Claudette Bailey
YMCA of Central Ohio – Early Head Start	ShaVae Wright

10:00am – 10:30am Member Introductions and Program Updates

Highlights

STEERING COMMITTEE MEMBERS: Carolyn Bernard, Columbus City Schools Alexis Tindall, Nationwide Children's Hospital Laura Poland, Children's Hunger Alliance Ali Segna, Columbus Public Health Bobbi Shannon, YMCA of Central Ohio Carol Smathers, Ohio State University Extension Dawn Sweet, Franklin County WIC Hannah Bills, Columbus Public Health Rebecca Wade-Mdivanian, Ohio State University Life Sports Maria Villareal, CDCFC Head Start Lory Sheeran Winland, American Heart Association

All

- New resources/education
- Policy, system and/or environmental changes
 Challenges or barriers

Partner/Organization	Program Updates
Ali/GHKC/CPH	Chronic Disease Prevention Advisory Board (CDPAB) has 4 working subgroups (Physical Activity, Tobacco Free Collaborative, Local Food Action Committee and GHKC), all of which feeds into the CHIP. CDPAB is restructuring into 2 symposiums a year and all will be invited once scheduled. Ingrid Adams from OSU Extension is working on a study and has requested the assistance of GHKC to expand her study beyond head start work as a result of the Program to Policy Training.
Hannah/HCHW	Childcare program is revamping email newsletters for child care providers, Alyssa and Hannah will be going to APHA to present on the online trainings from 2017, and revamping the website.
Carolyn/CCS	Imagination playgrounds circulating in the classrooms, height and weight BMIs from the kids and will be sharing that data soon.
Laura/CHA	Train the trainer for CATCH for afterschool kid age groups, will be training educators and opening up the program to other partners. December 5 th offered for free for the first round, send over any programs/sites that may be interested.
Emily/Access to Care	Revamped social works scrips referral process and incorporated in the EMS, will be piloted. Seen 60 referrals in the last week and they have been mostly children that have limitations to their health insurance.
Claudette/YMCA Head start	Rechecking heights and weights for kids who are overweight and obese before sending that information to parents. Working on an application for the Miracle Grow Garden Grant, each are \$5,000 and getting ready to partner with Ingrid Adams at OSU, participating in her study teaching critical thinking skills and working with parents.
Ashley/FCPH	Kristin has partnered with Grandview schools for the Ohio Days program, which is now 5 school districts total.
Lydia/Moms2B	Have Moms2B program and highly encourage their partners to attend the sessions. Gearing up for Christmas, have 8 sites around Columbus and try to get all of the infants adopted. Need volunteers to help wrap presents.
Alyssa/HCHW	Had EHS programs participate in the Great Apple Crunch, 4 EHS received donated apples and had interns do an activity with the centers.
Katie/CHC	Active commute support (having employers have support for bikes and walking to work). Add a smoke-free policy to childcare centers and a variety of programs. Adapting programs with individuals with disabilities (i.e. communication, grant-writing, and materials).
Lyana/CDC PHAP	Targeted Marketing webpage is up and running, the ChangeLab playbook will be placed here once it is finalized.

CDC Releases New 2018 State Action Guides on Fruits and Vegetables

- October, CDC released the 2018 State Action Guides on Fruits and Vegetables, based on the 2018
 Fruit and Vegetable State Indicator Report released earlier this summer and show how states are
 doing on important measures of access and affordability and highlight ways to increase fruit and
 vegetable consumption.
- Nationally, 12% meet daily fruit rec and 9% meet veg.
- Ohio, 10.6% meet daily fruit rec and 6.9% meet veg.
- 3 strategies: Improving access to fruits and vegetables for individuals and families, improving access to fruits and vegetables for children, food system support for fruits and vegetables
- Actions:
 - Include best practices for serving fruits and vegetables at meals and snack times in state ECE licensing requirements, quality rating systems, provider trainings, and professional development opportunities.
 - O Provide trainings to school districts and ECE providers on how to source and purchase local fruits and vegetables and serve them in meals and snacks.
 - Work with district administrators, school food service directors, and parent-teacher association wellness groups to place salad bars in school cafeterias.
- https://www.cdc.gov/nutrition/data-statistics/pdfs/Ohio_StateActionGuide_Sept2018_508.pdf
- https://www.voicesactioncenter.org/cdc_releases_new_2018_state_action_guides_on_fruits_and_veg_etables?utm_campaign=it_oct_25_18_5_nongmail&utm_medium=email&utm_source=voicesactionc_enter

Industry Updates Nutrition Criteria for Foods Marketed to Children

- Council of Better Business Bureaus' Children's Food and Beverage Advertising Initiative
- CFBAI's <u>updates to its uniform nutrition criteria</u> include stepwise progress toward lower sodium and added sugars.
- CFBAI failed to heed experts' advice to ensure that all foods marketed to children not only be low in unhealthy components like salt and sugars, but also provide a meaningful amount of healthy constituents like fruits, vegetables, and whole grains
- Down 65% for unhealthy foods compared to 88% in 2005 and the program started in 2007
- Should cover all their marketing to children, including all promotions in elementary and secondary schools, characters on packaging, and in-store displays.
- https://cspinet.org/news/industry-updates-nutrition-criteria-foods-marketed-children-20180920
- https://bbbprograms.org/siteassets/documents/cfbai/cfbai-white-paper-final-pdf.pdf

State of Obesity Updates 2018

- Adults: 33.8%, ranked 11/51 used to be 19/51
- 2-4 year old WIC participants, current obesity rate (2014)= 13.1%, 35/51
- 10-17 year olds, current obesity rate (2016-2017)= 18.6%, 6/51
- Combined overweight and obesity rate for 10-17 year olds rank was 16/51.
- https://stateofobesity.org/states/oh/

CSPI – Spotted at Target: the junior clothes section of this store now includes...chips and soda? Junk food marketing is extremely pervasive, even where it doesn't make sense. *ThinkBabiesChat Campaign (RWJF – Zero to Three)*

- Mission Readiness: Improved early childhood nutrition is important for our future national security. Children as young as two are experiencing rising obesity rates, which increase with age. Nearly one-third of 17-24 year olds are too overweight for military service.
- Quality early childhood education programs that promote good nutrition and physical activity can help prevent obesity among our youngest citizens Major General (Ret.) Mark Hamilton, U.S. Army.
- https://www.thinkbabies.org/
- https://twitter.com/Voices4HK?ref_src=twsrc%5Etfw%7Ctwcamp%5Eembeddedtimeline%7Ctwter m%5Eprofile%3AVoices4HK&ref_url=https%3A%2F%2Fvoicesforhealthykids.org%2Fstayupdated%2F

ABA Default Beverages in Children's Meals Policy

- ABA and America's leading beverage companies recognize that parents are more than capable of
 making the food and beverage choices that are best for their families. When it comes to their
 youngest children, we have repeatedly heard from parents that they believe that water, milk or juice
 are the best options. However, they also want to be able to select another beverage available on the
 menu, such as a soft drink, if they choose.
- This is why we are committed to working with our restaurant customers across the country who are interested in voluntarily adopting the following default beverages in children's meals:
 - Water Water, sparkling water or flavored water, with no added natural or artificial sweeteners; and/or
 - Milk Flavored or unflavored nonfat or low-fat (1 percent) dairy milk or non-dairy beverage that is nutritionally equivalent to fluid milk (i.e. soy milk) in a serving size of 8 ounces or less; and/or
 - Juice 100 percent fruit or vegetable juice, or fruit and/or vegetable juice combined with water or carbonated water, with no added natural or artificial sweeteners, in a serving size of 8 ounces or less.
- Healthy Kids' Meal Bill introduced in DC and Wilmington, Delaware (https://cspinet.org/news/healthy-kids%E2%80%99-meal-bill-introduced-district-columbia-20180918).
- https://www.ameribev.org/education-resources/policies-research/
- https://aba-bigtree.s3.amazonaws.com/files/pages/defaultbevschildrensmealspolicy-2018.pdf

10:40am – 10:45am Updates on Balance Calories Initiative

Ali Segna

- Balance Calories Initiative is a national, multi-year effort from America's leading beverage companies and the American Beverage Association to help fight obesity by reducing beverage calories consumed per person nationwide by 20 percent by 2025.
- The elements of the program include:
 - ENCOURAGING CALORIE AWARENESS AND BALANCE AT POINTS-OF-PURCHASE
 - Balance What You Eat Drink and Do
 - Calories printed on front of label
 - INCREASING INTEREST IN AND ACCESS TO REDUCED CALORIE BEVERAGE CHOICES
 - More choices
 - Smaller Portions
 - Less sugar

- o INCREASING CONSUMERS' AWARENESS OF CALORIE BALANCE THROUGH A STATEWIDE AWARENESS AND ENGAGEMENT PROGRAM
 - Market Tours Government officials, public health and faith based communities
- More choices, smaller portions, and less sugar
- Conducting market tours for community engagement, targeting government officials, public health, and faith based organizations
- Market Tour key observations and takeaways:
 - o 2 huge aisles
 - o 60% of sales and low-calories and no-calorie options (most contain sugar alcohols), however limited low-calorie options at OSU due to consumer demand
 - Sugar alcohols can have a laxative effect or other gastric symptoms in some people, especially in children.
 - o Re-sealable caps is what was referred to as "portion control"
 - o Gatorade Zero uses sugar alcohols
 - Grocery stores stock based on what is selling in that population, the market tour took place in Grandview, not in Columbus, which is not representative of the community they are trying to serve
- Key Bridge Third party research group for the BCI
 - o They claimed that preliminary research indicates a -3% for 2018.
 - o 1% reduction in 3 years' time will not lead to the goal of reducing by 20% by 2025
 - Wescott, R. F., & Fitzpatrick Elizabeth Phillips, B. (2016). PREPARED BY: Balance Calories Initiative: Baseline Report for the National Initiative. Retrieved from www.keybridgedc.com.
 - Cohen, D., Bogart, L., & Castro, G. (n.d.). Early Evaluation of the Balance Calories
 Initiative. Retrieved from
 https://apps.cce.csus.edu/sites/childobesity/17/speakers/uploads/WS1.4_Cohen,D.pdf
- Discussion:
 - o Soda marketing companies: sodalicious, https://www.mysodalicious.com/

10:45am – 10:50am Activity Break

All

10:50am – 11:30am Follow-up Activity from the Program to Policy Training

Ali Segna

Members were broken up into small groups to conduct a SWOT analysis of GHKC n the following categories:

Funding and restrictions:

- Sharing collaborations
- Weaknesses: needs and being strategic about funding
- Understanding what other agencies are doing, not to recreate what is being done but being able to replicate what has already been done.

Support:

• Need support from other groups, need more community buy in, who are we and how do we make a voice for the marketing efforts that positive messaging

Program to Policy:

• Time is a strength and weakness: risk losing momentum, partners that have interest, finding ways to keep people moving and motivated. Creating a plan of action.

Compliance:

• Have a lot of great representatives from different sectors, big area of opportunity to create resources for decision makers to change environments, speaking towards the public opinion of wanting to be healthy (i.e. corner stores). Communicating to groups in many different ways to match their needs.

Next Steps: Be prepared to complete end of year evaluations – What have been your successes for 2018?

Next Meeting: Tuesday December 4, 2018, 10am-11:30am Columbus Public Health, Room 119C